

CLAIMS ONLY

SERIAL NO.

9 723 400

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4		2				
5		0				
6		0				
7		0				
8		1				
9		1				
10		1				
11		3				
12		0				
13		0				
14		0				
15		1				
16		1				
17		0				
18	1					
19		1				
20		2				
21		0				
22		0				
23		0				
24		0				
25		0				
26		0				
27		0				
28		1				
29		0				
30	1					
31		1				
32						
33						
34						
35		0				
36		0				
37		0				
38	1					
39		1				
40		1				
41		1				
42		4				
43	1					
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	5					
TOTAL DEP.	50					
TOTAL CLAIMS	55					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE		
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	
1	1									
2		1								
3		2								
4		2								
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7		1								
8		1								
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15		1								
16		1								
17		1								
18	1		1							
19		1		1						
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27		1		2						
28		1		2						
29		1		2						
30	1		1							
31		1		1						
32		1		1						
33		3		2						
34		3		3						
35		2		2						
36		2		2						
37		2		2						
38	1		1							
39		1		1						
40		1		1						
41		1		1						
42		4		4						
43	1		1							
44			1							
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100										
TOTAL IND.	5						TOTAL IND.			
TOTAL DEP.	50						TOTAL DEP.		60	
TOTAL CLAIMS	55						TOTAL CLAIMS		61	